

REQUEST FOR USE OF FACILITIES

*TO BE COMPLETED BY APPLICANT

Check the facilities desired:

X	FACILITY	# of Rooms	Location	\$/Hour
	Classroom(s)			
	Library			
	Gymnasium			
	Kitchen			
	Cafeteria			
	Auditorium			
	Swimming Pool			
	Computer Lab			
	Ind. Arts Room			
	Other Building Space			
	Playfield			

Group/Individual Making Request:

Percentage of persons in the group who are residents of the School District _____ %

Address of Applicant: (Street)

City: _____ State: _____ Zip: _____

Home Phone: () _____

Business Phone: () _____

Request for Facility Use Building

1. Purpose of Function _____
*If use is a "recreational activity," please complete Form 7510 F3. See Policy 7510
2. Cost of Admission/ Fees: \$ _____
3. Describe any items to be sold at this function: _____

4. Purpose of money received: _____

5. Type of materials to be distributed: _____

6. Number of people attending: _____
7. Day(s) Needed _____
Date(s) Needed _____
Time(s) Needed _____
8. Equipment Requested. Please describe in detail (number of chairs and/or tables, movie projector, PA systems, etc.) _____

9. Describe setup required (if different than normal setup): _____

10. A \$ _____ deposit is required for those in categories 3, 4, and 5 as specified in administrative guidelines for Board policy 7510. The deposit is refundable with 48hr notice of cancel option.
11. User fees are due and payable upon receipt of School District billings, which will be made at the conclusion of use.

"The applicant hereby agrees to indemnify and hold harmless the School District from any liability for damages to any person or property in or about the School District premises from any cause whatsoever. All persons or groups using school facilities shall be responsible for the proper supervision, control, and accommodation of persons attending the activity. The applicant agrees to be responsible for the preservation of order."

Applicant Signature _____ Date _____

Request for Facility Use Building

Category of User (See AG 7510B)

1	Category 1	
2	Category 2	
3	Category 3	
4	Category 4	
5	Category 5	

	Charges to User:	Estimated Cost	Actual Cost to Date	Final Actual Cost
1	Facility Rental			
2	Equipment Rental			
3	Custodial Cost			
4	Food Service Cost			
5	Lifeguard Cost			
6	Damages			
7	Other:			
	TOTAL COST:			
	LESS DEPOSIT RECEIVED:			
	BALANCE OWED:			

	<p>This request is fully approved</p> <ul style="list-style-type: none"> • Except for any limitations noted under "Comments" below
	<p>This request is NOT approved</p> <ul style="list-style-type: none"> • Reasons noted under "Comments" below.

COMMENTS: _____

Signed: _____ Date: _____